

## **HEMI-SYNC® SURF IN PEDIATRIC DENTISTRY**

*by John R. Smith, Jr., DMD*

*John Smith is a pediatric dentist in private practice in Bowling Green, Kentucky. He has been a member of the Professional Division since 1988, and uses Hemi-Sync to support both his staff and patients. Here, Dr. Smith briefly presents the cases of three patients who listened to the Hemi-Sync Surf tape during dental treatment.*

A Hemi-Sync Synthesizer model 202 has been hooked up to the audio equipment in our office since 1986. With few exceptions, it has been tuned to the mode for enhancing focused, cognitive attention. The intent has been to augment the staffs attention levels as much as possible. However, this is not the mode I would choose for a child receiving dental care. I felt it more prudent for the staff to remain focused during the day. Evaluation of any effects is virtually impossible primarily due to the volatile nature of pediatric dentistry.

I have had occasion to use the *Surf* tape with a selected few patients and can describe their first impressions as well as some of my own.

### **Case 1**

A 20-year-old white female, healthy, voiced some apprehension, specifically regarding injection; dental needs were routine restorative, i.e., alloys. We chose the *Surf* tape, used nitrous oxide gas (N2O) at a 25% to 35% level, 2% xylocaine; epinephrine 1/100,000; the routine restorative was performed. The patient's first comment after the procedure was "I want one. I felt like I was somewhere else for a long time." When asked if she would like the *Surf* tape for her next appointment, she said yes. The patient has not yet returned to the office. My observation was that this patient handled the entire dental experience with a great deal of calm.

### **Case 2**

A 13-year-old white female, healthy, who was not particularly apprehensive about dental care, came to the office for routine dental needs. She agreed to use the *Surf* tape out of curiosity. With the tape, no N2O, 2% xylocaine; epinephrine 1/100,000, her restorative needs were met uneventfully. The patient's comments following the dental treatment ranged from "I think the *Surf* tape helped. It wasn't as scary," to "I kept saying to myself 'Mind over matter, it doesn't hurt.'" I observed that this patient was either borderline or truly asleep for most of her restorative work.

### **Case 3**

A 14-year-old white female, healthy, with some apprehension regarding injections, who, however, has always been able to handle the experience, was in the office for routine restorative dental needs. Her parents requested no N2O due to an exceptionally aggressive chronic cough which had been present for approximately three weeks. She accepted my suggestion to use the *Surf* tape. With the tape, 2% xylocaine, and epinephrine 1/100,000, her restorative needs were met uneventfully.

What may be most interesting in this patient's case are my clinical observations. In a short period of time she drifted into a sleep state, her coughing spells ceased, and a chronic twitching of the legs noticed during injection also stopped. Following the procedure, the patient's comment was "I like the waves better than music; it relaxes me better." She returned one week later, chose not to use the *Surf* tape at that time, but did make the comment, "I dreamed I was on the beach every night this past week."

Obviously, these three cases do not follow any rigid scientific protocol, and, at best, were evaluated in a very subjective fashion. However, in my opinion, Case 3 demonstrated real possibilities with the use of Hemi-Sync in a pediatric dental office setting. Future plans include using a variety of Hemi-Sync tapes with some of the younger patients who may struggle initially with accepting dentistry as a necessary procedure.

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